

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Ph</i>	<i>6204</i>	<i>9/28/00</i>
Q.I.P.E. CLASSIFIER		<i>19</i>	<i>10-3-00</i>
FORMALITY REVIEW		<i>64477</i>	<i>12-6-00</i>
RESPONSE FORMALITY REVIEW		<i>64477</i>	<i>1-12-01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 +/- Restricted O Objected

Claim	Date
Final Original	
1	<i>10/26/00</i>
2	<i>10/26/00</i>
3	<i>10/26/00</i>
4	<i>10/26/00</i>
5	<i>10/26/00</i>
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Claim	Date
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If more than 150 claims or 10 actions
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